

Class 2 Temporary Body Art Facility Checklist (application supporting information)

Temporary body art facility name:

Body art event coordinator name and contact number (if different from above):

Please answer all the following questions:

1. Does your body art facility (booth) have permanent or temporary walls/partitions, a roof and a floor?

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Yes	No

- 2. Is the body art service area physically separated from public access or an incompatible businesses/ services/activity (e.g. microblading is physically separated from hair and nail care)? Yes No
- 3. Does the power supply and lighting meet the Nova Scotia Safe Body Art Act, Regulations, and Standards? No

Yes	
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Is each body art service area within this temporary body art facility equipped with a sharps 4. container? Yes

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- 5. Is there a plan for proper removal/disposal of solid and liquid waste? Yes No
- Does the facility have access to a potable water supply? 6. Yes No
- 7. Do personnel have unimpeded access to a hand wash station restricted for personnel use only? Yes No
- 8. Are the hand wash stations equipped with the following? Check all that apply.

Liquid soap dispenser

No

Towels/hand dryer

Water

Trash can

9. Is there alcohol-based hand rub available at each body art procedure area?

Yes



10. Is there access to an equipment cleaning area to allow for effective cleaning and disinfection of any body art equipment that will require cleaning and disinfection? NOTE: onsite sterilization is prohibited.

- Are all high contact surfaces smooth, nonabsorbent, without cracks or holes, and capable of withstanding repeated cleaning and disinfection?
 Yes
 No
- 12. Indicate what surface disinfectant(s) will be used (proved the D.I.N and/or medical device number).

Name

number:

- 13. Are washrooms available for personnel and customers of the business?
- 14. How many artists will be operating under this temporary body art facility permit?
- 15. Approximately how many individuals will receive services during the event?
- 16. Have all your personnel received an infection prevention course in the last year? Yes No If yes, please list course name and provider:

Course name: Completion date:

17. Do you have written, procedure-specific, aftercare instructions available for clients for each service being offered as outlined in the Nova Scotia Safe Body Art Act, Regulations, and Standards?

Yes	No
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18. Do you operate a permanent Nova Scotia body art facility with a valid permit that is equipped to reprocess reusable instruments?

	Yes		No
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If yes, please provide facility name and permit number:

19. Please indicate the type of instrument(s) that will be used to perform body art services. Check all that apply:

_____ Single-use



Pre-sterilized single-use

Reusable requiring cleaning followed by disinfection

Reusable requiring cleaning followed by sterilization

20. If using reusable instruments that require cleaning and sterilization, please provide the instrument handling, transportation and reprocessing procedure for these instruments (either attached or fill in below). Note: on-site sterilization is prohibited at a temporary event.

- If applicable, are all inks and pigments of professional grade and do they meet the requirements of the federal *Food and Drugs Act* and *Cosmetic Regulations*?
 Yes
- If applicable, does jewelry used for new body piercing meet the requirements in the Nova Scotia Safe Body Art Act, Regulations, and Standards?
 Yes
- 23. Provide any additional information you wish to convey as part of your application (optional):